Developments

Volume 26, Issue 3 | Fall 2006

AADAC on the Issues

How do you put 55 years of experience into three pages? AADAC's policy and position statements attempt to do just that.

Policies are statements of guiding principles adopted by AADAC's board on important addiction topics. These principles give broad direction to the way that AADAC operates and the services that it offers. They range from a basic code of ethics for staff to statements on controversial subjects like harm reduction.

The most fundamental policy is the Corporate Mission Statement. The vision, mission and values it outlines give a context for the other 10 policy statements and the four position statements that AADAC's board currently maintains. Taken together, they provide a comprehensive picture of AADAC.

AADAC's positions are statements of key considerations adopted by the commission. Positions present the commission's views on important addiction topics, such as the legal drinking age or drug testing in the workplace.

AADAC is committed to reducing the harmful effects of alcohol, other drug and gambling problems, and the policies and positions guide how the commission approaches each issue to best meet that commitment.

AADAC's policies and positions reflect the commission's value for basing decisions on evidence. A review of the environmental context and relevant research helps inform each issue. Policies and positions are revisited every few years to ensure that they still reflect current research and thought in the addictions field.

This issue of *Developments* presents AADAC's policies on three of the major areas of our business: alcohol, illicit drugs and gambling.

Policy on Alcohol

Policy Statement

The Alberta Alcohol and Drug Abuse Commission recognizes beverage alcohol as a legal substance that can adversely affect the health and well-being of many Albertans. In acknowledging the hazardous nature of alcohol, the commission is committed to actions that will minimize the harm associated with alcohol use. These actions must be balanced with the

freedom of individuals to exercise personal responsibility in their use or non-use of alcohol products.

Context

According to the 2004 Canadian Addiction Survey, 79.5% of Albertans drink alcohol, and 15.3% of those who drink do so at hazardous or harmful levels. Nearly 10% of respondents reported that (in the year previous to the survey) they had suffered harm from their own drinking. The most common types of harm were problems with physical health, friendships, marriage, social life, or finances. More than a third of respondents said that someone else's drinking had caused them harm: for example, they had experienced humiliation, verbal abuse, physical assault, marriage problems or family problems.

The majority of Albertans use alcohol responsibly. AADAC recognizes that a variety of policy measures are essential to a comprehensive alcohol control strategy. Effective regulation of alcohol involves a balance between public health, safety, and economic interests. It is necessary for the government to control the availability of alcohol to reduce the likelihood of harm resulting from the consumption of alcohol, and for AADAC to support these measures and offer appropriate treatment, prevention and information services.

Research and experience suggest that there are a number of population-based approaches that affect consumption and the development of alcohol-related problems. These include controlling physical availability, increasing taxation to reduce economic availability and influencing social availability through prevention programs and information strategies that promote responsible alcohol use, including abstinence. These options should be complemented by targeted approaches that focus on particular drinking patterns, situations and populations as well as harm reduction strategies such as server training, impaired driving countermeasures and brief health interventions. All approaches must be clear, socially acceptable, and enforceable within the community.

No safe limit of alcohol consumption during pregnancy has been established; women should abstain entirely when they are trying to get pregnant, are pregnant or are breastfeeding. Others who should not drink at all include adolescents and anyone who has chronic health problems, mental illness, or a personal or family history of drinking problems. Alcohol should not be used at all in situations where attention and co-ordination are required (for example, operating a vehicle or machinery).

Principles for Action

No single agency or isolated policy intervention can address all relevant aspects of the complex relationship between alcohol consumption and alcohol-related problems. AADAC therefore works in co-operation with individuals, other government agencies, the beverage and hospitality industries, and the community to support regulations and promote responsible alcohol use. AADAC's core services relating to alcohol are the provision of information, prevention, and treatment services.

Information
AADAC offers a wide range of print and web-based materials about the prevalence, causes, prevention and treatment of alcohol-related problems. Resources continue to be created and updated using international, national, and local research.

Prevention
Successful prevention requires consistent application over time and must involve some strategies that target all Albertans and others that target specific groups (for example, youth). AADAC delivers quality prevention programs and services that delay the onset of drinking, prevent the development of alcohol problems, and increase protective factors and reduce risk factors associated with alcohol abuse. (Risk factors are life events or experiences associated with an increase in problematic behaviour such as alcohol abuse. Protective factors are life events or experiences that reduce or moderate the effect of exposure to risk factors.)

AADAC's programs place primary emphasis on providing accurate information, improving coping skills, and encouraging individual, family and community responsibility for preventing alcohol-related harm. AADAC involves and supports collaborations with community organizations to increase the availability and relevance of prevention programs.

Treatment
AADAC and its funded agencies provide a range of treatment options and services to promote recovery from alcohol problems. These programs are guided by sound research and best practices in the addictions field. Clients are actively involved in defining their treatment goals and recovery plans. Their involvement improves their likelihood of success.

For more information, see the following resources available at **aadac.com**:

- *AADAC Policy on Alcohol*
- *Health Benefits and Risks of Moderate Alcohol Consumption* (Policy Background Paper)
- *Alcohol: The Forgotten Problem* (Policy Background Paper)

Policy on Illicit Substances

Policy Statement

The Alberta Alcohol and Drug Abuse Commission recognizes that the use of illicit substances adversely affects the health and well-being of many Albertans. The commission believes that a balanced, co-ordinated and comprehensive approach is most effective in reducing harm associated with illicit substance use. The commission will provide information, prevention and treatment services to address illicit drug use. The commission also supports reasonable efforts by stakeholders to reduce the consumption of illicit substances, provided that these efforts do not create more harm than the actual use of the illegal drugs.

Context

For the purpose of this policy, the term "illicit substance" refers to all psychoactive drugs and their derivatives, except alcohol and tobacco, that are used or distributed in a manner prohibited by Canadian law. Alcohol and tobacco are licit substances considered in AADAC's *Policy on Alcohol* and *Policy on Tobacco*, respectively.

Different drugs are classified "illicit" for different reasons. For example, cocaine is considered illicit because both individual use and possession are illegal. Prescribed medications like sedatives are legal drugs, but are of concern when used in situations prohibited by law. In the legal context, illicit drug use is, by definition, considered abuse or misuse.

Illicit drug use occurs throughout the population, usually at rates well below those for licit substances like tobacco or alcohol. According to the 2004 Canadian Addiction Survey, 15.4% of Albertans aged 15 and older had used cannabis in the previous year. Less than 3% reported using any other illicit drug.

Patterns of illicit drug use change over time. Recent surveys indicate that use of cannabis has increased significantly over the last decade. There is also evidence that use of some synthetic drugs (such as ecstasy and methamphetamine) has risen, especially among youth. Generally, young people are more likely than adults to use illicit drugs.

Community values and beliefs about illicit substances are also subject to change. For example, recent studies show increasing support for reducing sanctions for cannabis possession and for making cannabis available for medicinal purposes.

A balanced approach that integrates harm reduction, demand reduction and supply reduction is required to respond effectively to illicit substance use. The use and abuse of illicit substances cannot be managed in isolation from factors determining population health. These include income and social status, social support networks, education, employment and working conditions, physical environments, biology and genetics, personal health practices and coping skills, healthy child development, and health services. Effective intervention requires a focused, collaborative approach that builds on strengths, and increases individual and community capacity.

Principles for Action

AADAC provides information on illicit substances, programs intended to prevent the use of illicit drugs and forestall future problems, and treatment services to help people and their families overcome problems related to illicit substance use.

Information
AADAC will provide accurate, current and evidence-based information on illicit substances. The commission will develop and distribute print materials and other information resources that assist Albertans, AADAC staff, AADAC clients, and other stakeholders in understanding the harm associated with illicit substance use. AADAC will undertake research and evaluation to support delivery of addiction programs and services.

Prevention
AADAC will provide quality programs and services to reduce harm associated with illicit substance use. Services and programs will target individuals, families and communities and will help to prevent the development of problems, and increase protective factors and reduce risk factors associated with illicit substance use. Prevention programs and strategies will be guided by research and best practices in the addiction field.

Treatment
AADAC will provide a continuum of treatment options to assist people in their recovery from the harm associated with illicit substance use. Treatment programs and services will be guided by research and best practices in the addiction field.

The commission continues to value a client-centred approach to treatment that builds on individual strengths. Individuals will be actively involved in defining treatment goals and

determining the most appropriate methods for achieving these goals.

For more information, see the following resources available at **aadac.com**:

- *AADAC Policy on Illicit Substances*
- *Policy on Illicit Substances: Background Paper*

Policy on Gambling

Policy Statement

The Alberta Alcohol and Drug Abuse Commission (AADAC) recognizes that the majority of Albertans gamble. A small minority of those who gamble experience a range of negative health and social consequences. The commission works with key partners in government, the community and the gaming industry to minimize the harm associated with gambling. This is done while respecting the freedom of individuals to exercise personal responsibility in their gambling activities.

Context

Gambling is the act of risking money, property or something else of value on an activity with an uncertain outcome. There are many forms of gambling, whether licensed (for example, casinos, bingos, video lottery terminals [VLTs], scratch tickets and horse racing) or informal (for example, making bets among friends, colleagues and acquaintances).

In Alberta, legalized gambling revenue provides essential funding for many organizations. Though the majority of Albertans are able to enjoy gambling as a recreational activity, some people develop gambling problems and the government recognizes its responsibility to assist these people. AADAC receives funding from the government to provide problem gambling services to those who need it.

Gambling problems can range from minor to quite serious. Gambling may cause only occasional problems, making it difficult to pay a utility bill or rent, for example. On the other hand, it may cause ongoing harm to the gambler and his or her family, leading to serious problems including addiction, financial hardship, marital problems, emotional distress, and suicide. Many problem gamblers also have concurrent substance abuse or mental health problems, requiring comprehensive treatment.

Approximately 82% of Albertans aged 18 or older gamble. Of those, around 5% experience moderate to severe gambling problems. While the percentage of adults with gambling problems in Alberta is higher than in most other provinces, the prevalence of gambling and gambling problems among Alberta youth is similar to that in other provinces. Recent evidence indicates that in Alberta and other provinces, gambling by young people is increasing significantly.

Nine per cent of adults receiving treatment in 2005/2006 were admitted for gambling. The gambling activities that adult clients were most likely to have been involved in during the 12 months prior to treatment were

- playing the lottery (35%)
- buying instant-win tickets (32%)
- playing VLTs (31%)
- playing slot machines (21%)
- betting in casinos (17%)

Playing VLTs was the gambling activity reported most frequently as a concern for clients (10%), followed by playing slot machines (7%) and betting in casinos (6%).

The social stigma attached to problem gambling and other addictions makes many people reluctant to seek assistance. Although there are some differences, experience has shown that problems related to gambling and substance use can be treated using similar approaches.

Principles for Action

AADAC provides gambling services in three areas: information, prevention, and treatment.

Information
Current and accurate information about prevalence, causes, prevention and treatment of problem gambling assists AADAC staff, industry professionals, clients, decision-makers and other stakeholders to learn and understand the issues related to gambling and problem gambling. AADAC develops this information through sound research and collaboration with other agencies.

Prevention
The responsibility for minimizing the risk of problem gambling is shared by all who benefit from the gambling activities, including the gaming industry itself, community organizations who receive funding from gambling, and the Alberta Government. Widespread collaboration with the Alberta Gaming and Liquor Commission and with community-based agencies and other stakeholder groups ensures that Albertans throughout the province can participate in cost-effective prevention activities.

AADAC encourages individuals, families, and communities to avoid gambling problems by reducing risk factors and enhancing protective factors.

Treatment
People who seek treatment for problems related to gambling should have access to effective, relevant and compassionate care, delivered by qualified staff. AADAC collaborates with and provides funding to community organizations to ensure that a range of treatment options are available for individuals and their families. The treatment reflects research and current best practice in the addictions field. For treatment to be effective, problem gamblers need to be actively involved in defining their personal treatment goals and plan, and treatment staff must be able to refer them to crisis services, aftercare and self-help groups as appropriate.

For more information, see the following resources available at **aadac.com**:

- *AADAC Policy on Gambling*
- *Gambling in Alberta: Policy Background Paper*

The Back Page

Concurrent Disorders Demonstration Project Reports

AADAC's Building Capacity Initiative has recently produced four evaluation reports on two demonstration projects in Edmonton and Fort McMurray. These reports show how AADAC applies a position document to its services for Albertans. The demonstration projects illustrate the real-life application of the concept of co-ordinated treatment, based on AADAC's framework for action on addiction and mental health, the provincial *Building Capacity* framework.

The *Summary Report of the Concurrent Disorders Demonstration Project Evaluations* is now available to the public through **aadac.com**. This 21-page report briefly describes the two demonstration projects, the methods used to evaluate each project, and the collaborative care models used for each project. It also outlines outcomes and major themes that emerged from the projects, highlights what worked well and what could be improved, and offers recommendations and implications that will inform similar projects as they are implemented at a regional and provincial level.

Join the AADAC Team!

Want to make a difference in people's lives? Want a career that challenges you, rewards you, and teaches you something new every day? Want to work with some of the most caring, conscientious and dedicated people you'll ever meet?

The overwhelming majority of AADAC employees feel valued by AADAC and are enthusiastic about their work. Check out our career opportunities today!

Copyright & Disclaimer Statement
Privacy Statement

AADAC
ALBERTA ALCOHOL AND DRUG ABUSE COMMISSION

Suite 200, 10909 Jasper Avenue
Edmonton, Alberta, Canada T5J 3M9

ISSN: 1712-1736